

## UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

RECEIVED MICHAEL W. DOBBINS COURT

JermainerMare	CLERK, U.S. DISTRICT
(Enter above the full name of the plaintiff or plaintiffs in this action)  vs.	08CV3689 JUDGE NORDBERG MAGISTRATE JUDGE ASHMAN
The 1.6.2. on 11" and State Street	
(Enter above the full name of ALL defendants in this action. Do not use "et al.")	
CHECK ONE ONLY:	
COMPLAINT UNDER U.S. Code (state, county,	THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983 or municipal defendants)
	THE CONSTITUTION ("BIVENS" ACTION), TITLE Code (fcderal defendants)
OTHER (cite statute, if k	mown)
BEFORE FILLING OUT THIS COMP	PLAINT, PLEASE REFER TO "INSTRUCTIONS FOR

FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.

ľ.	Plaintiff(s):			
	A.	Name:		
	В.	List all aliases:		
	C.	Prisoner identification number:		
	D.	Place of present confinement:		
	E.	Address:		
	num'	ere is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. ber, place of confinement, and current address according to the above format on a rate sheet of paper.)		
II.	(In A	Defendant(s): (In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.)		
	A.	Defendant:		
		Title:		
		Place of Employment:		
	B.	Defendant:		
		Title:		
		Place of Employment:		
	C.	Defendant:		
		Title:		
		Place of Employment:		
	(If y	ou have more than three defendants, then all additional defendants must be listed		

according to the above format on a separate sheet of paper.)

III.	List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court in the United States:			
	A.	Name of case and docket number:		
	В.	Approximate date of filing lawsuit:		
	C.	List all plaintiffs (if you had co-plaintiffs), including any aliases:		
	D.	List all defendants:		
	E.	Court in which the lawsuit was filed (if federal court, name the district; if state court name the county):		
	F.	Name of judge to whom case was assigned:		
	G.	Basic claim made:		
	Н.	Disposition of this case (for example: Was the case dismissed? Was it appealed Is it still pending?):		
	ī	Approximate date of disposition:		

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. COPLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

## IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

The Police officer J. Br. 11 stor 6491 locked	me up for
Some circle cocarne. He and his team ca	
put this case on me. He and the 1.6.2.5	
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## V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

want to sae for false accest and pain and Sufferi -ng and plas lost wages. I want to get Paid for all

The plaintiff demands that the case be tried by a jury. YES VI.

## CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 19 day of June, 20 0 8 Jermaine X. Ware (Signature of plaintiff or plaintiffs) Jerngine Ware (Print name) 20070061733 (I.D. Number) 2310 S. State APT 608 1dress)